

REQUEST FOR COPY OF PERSONAL INCOME TAX OR FIDUCIARY RETURN

Please see other side of this form to request Bank & Corporation (100, 100S, 100W, 100WE or 199), Partnership (565), or Limited Liability Company (568) Returns.

NAME AND ADDRESS PHOTOCOPIES ARE TO BE MAILED TO	NAME AND ADDRESS OF TAXPAYER(S) AS SHOWN O	N TAX RETURN/CLAIM	
REQUESTER'S TELEPHONE NUMBER	TAXPAYER'S TELEPHONE NUMBER		
TAX YEAR(S) REQUESTED	SOCIAL SECURITY NUMBER(S) (If Joint return enter spouse's SSN below) SPOUSE'S SSN		
SIGNATURE OF TAXPAYER OR REPRESENTATIVE	TYPE OR PRINT NAME	DATE	
SIGNATURE OF SPOUSE	TYPE OR PRINT NAME	DATE	

Copies of tax returns are available ONLY for the last three years.

You must sign this request. Without proper authorization, we will be unable to provide you with the requested copies. If you are not the taxpayer, you must provide appropriate authorization to receive copies of tax returns or claims. Appropriate authorization includes one of the following:

- A letter signed by the taxpayer authorizing Franchise Tax Board (FTB) to release the requested material to you; or
- A Power of Attorney (FTB 3520) currently in effect; or
- An Internal Revenue Service (IRS) Power of Attorney stating that it applies to FTB (above limitations still apply); or
- · Form FTB 3516 signed by the taxpayer; or
- In the case of a deceased taxpayer, a certified copy of the letters of administration or testamentary, dated within the
 past 12 months. If the letters are more than 12 months old, a clerk of the court must recertify them stating they are
 still in effect.

If a bankruptcy is involved and you are not the taxpayer, you must:

- · Provide court documents appointing you as trustee; or
- Provide a letter signed by the trustee authorizing you to receive this material and a copy of the court documents appointing the trustee; or
- · Provide appropriate authorization.

*There is no charge for	a copy of your personal	income tax return if the t	<u>ax year requested</u>	meets the following ci	riteria:

You request a copy of the return during or after a Franchise Tax Board audit.
 You have been a victim of a designated California state or federal disaster.

If you do not meet either of the above criteria, send a check payable to the Franchise Tax Board for \$10.00 for each tax year requested.

Mail your request to:
RID UNIT
FRANCHISE TAX BOARD
PO BOX 942867
SACRAMENTO CA 94267-0001

For additional information call (916) 845-5375